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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Li et al.

Docket No.: PF126P1D1

Application No.: 09/348,815

Group Art Unit: 1635

Filed: July 8, 1999

Examiner: J. Zara

For: Connective Tissue Growth Factor-2

PRELIMINARY AMENDMENT

Commissioner For Patents
Washington, D.C. 20231

Sir:

In response to the outstanding Office Action dated January 29, 2002, please consider the following remarks. Applicants submit concurrently herewith: (a) Fee Transmittal, with appropriate fee(s); (b) a request for a one (1) month extension of time, accompanied by appropriate fee(s); (c) a Continued Prosecution Application Request, with appropriate fee(s); (d) a Supplemental Information Disclosure Statement and SB/08 along with copies of references AA-AF; and (e) a Version With Markings To Show Changes Made. Please amend the application as follows.

In the specification:

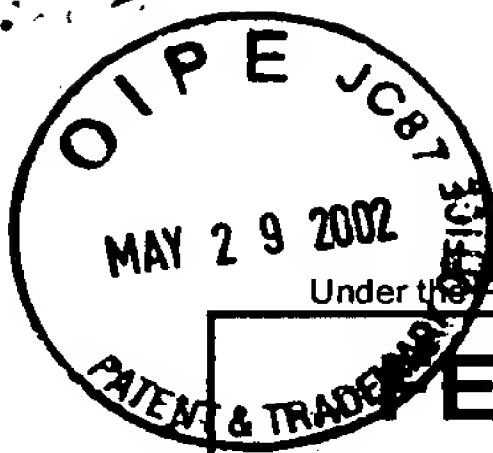
Please replace the first paragraph of the specification with the following paragraph.

--This application is a divisional of U.S. Patent Application Serial No. 08/459,101, filed June 2, 1999, now U.S. Patent No. 5,945,300, granted August 31, 1999, which is a continuation-in-part of, and claims priority under 35 U.S.C. § 120 to U.S. Patent Application Serial No. PCT/US94/07736, filed July 12, 1994, both of which are incorporated by reference in their entireties.--

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PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2002 <i>Patent fees are subject to annual revision.</i>	Complete if Known	
	Application Number	09/348,815
	Filing Date	July 8, 1999
	First Named Inventor	Haodong Li
	Examiner Name	J. Zara
	Group Art Unit	1635
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	PF126P1D1
TOTAL AMOUNT OF PAYMENT		(\$) 1,240.00

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																													
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																													
<input checked="" type="checkbox"/> Deposit Account																																															
Deposit Account Number	08-3425																																														
Deposit Account Name	Human Genome Sciences, Inc.																																														
The Commissioner is hereby authorized to: (check all that apply)																																															
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																																															
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application																																															
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																															
FEE CALCULATION																																															
1. BASIC FILING FEE																																															
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>(\$) 0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee		106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee		SUBTOTAL (1)					(\$) 0.00		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																															
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Total Claims 37 -20** = 17 x 18.00 = 306.00																																															
Independent Claims 4 -3** = 1 x 84.00 = 84.00																																															
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*Reduced by Basic Filing Fee Paid																																															
**or number previously paid, if greater; For Reissues, see above																																															
		Other fee (specify) 131 Basic Filing fee - Utility (CPA) 740.00																																													
		SUBTOTAL (3) (\$) 850.00																																													

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Janet M. Martineau	Registration No. (Attorney/Agent)	46,903
Signature		Telephone	(301) 315-2723
		Date	May 29, 2002

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